



*Healthy People. Healthy Communities.*

Department of Public Health & Human Services

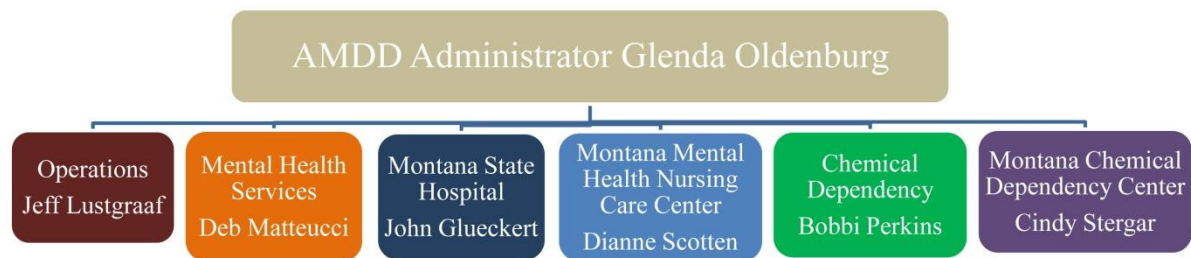
## Presentation to the 2015 Health and Human Services Joint Appropriation Subcommittee

### **ADDICTIVE AND MENTAL DISORDERS DIVISION**

Medicaid and Health Services Branch  
Department of Public Health and Human Services

Reference:

Legislative Fiscal Division Budget Analysis, Volume 4, Page B-126-B151

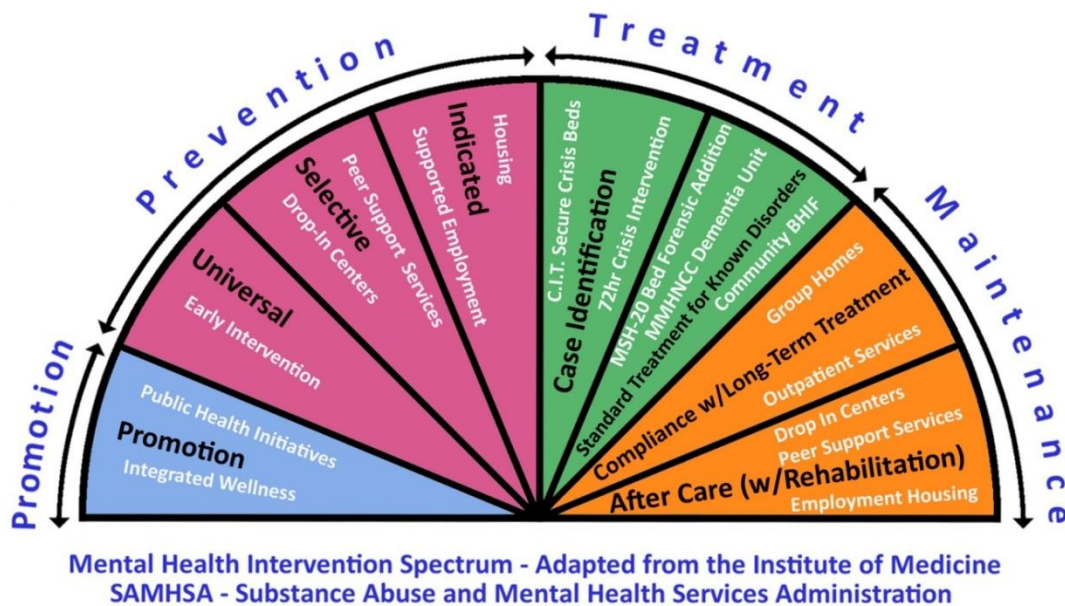


### **CONTACT INFORMATION**

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## OVERVIEW

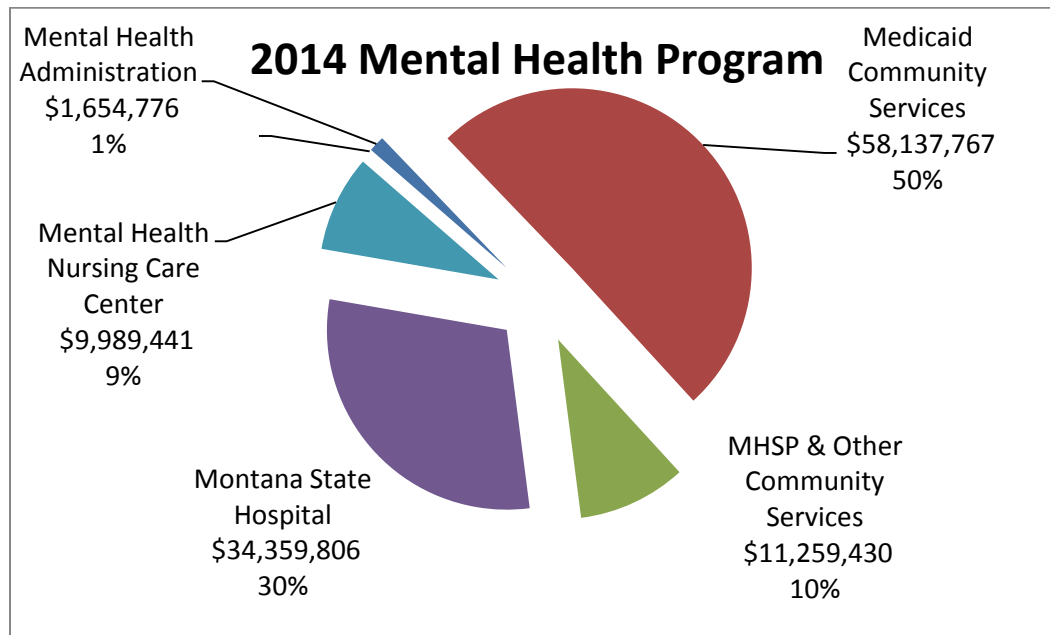
The **Addictive and Mental Disorders Division** provides publicly funded mental health and substance use disorder treatment services across a continuum of care throughout Montana. Services range from prevention and early intervention services to inpatient, residential and rehabilitation services. AMDD directly provides services and contracts with behavioral health providers statewide to serve an estimated 31,000 adults in one or more of the programs administered by this division.



The Division's fundamental values are incorporated throughout the work done in each program:

- Empowered, supported and consumer focused
- Continuum of Care best meets individualized needs
- Focus on restoring self-esteem and attaining a meaningful role in society, using recovery and rehabilitation-based treatment rather than only management of symptoms
- Opportunity for each individual to function as well as possible in normal activities such as independent living, employment, education, and social relationships
- Evidence based models of treatment

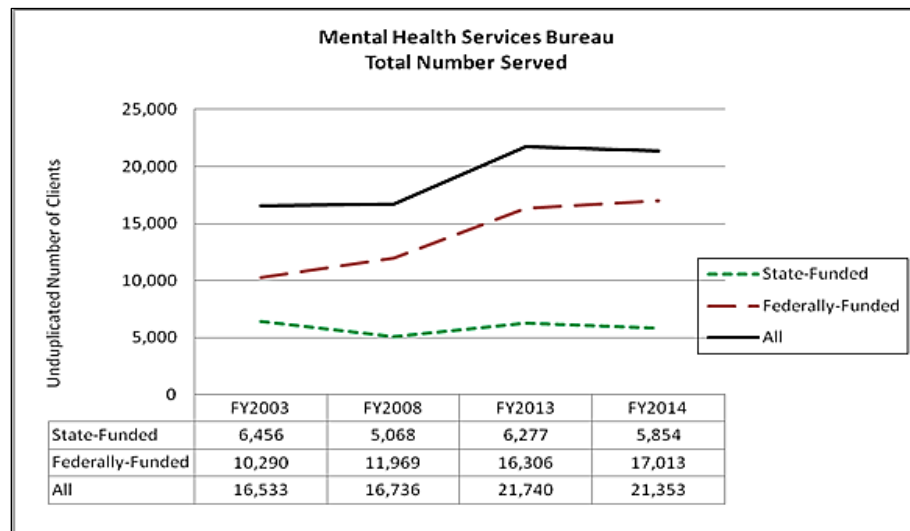
## SUMMARY OF MAJOR FUNCTIONS



**The Mental Health Program:** Services are provided for individuals 18 years of age and older who are in psychiatric crisis and those who have been diagnosed with a mental illness and are eligible for Medicaid or the state-funded Mental Health Services Plan. Programs form a continuum of care from community based services offered by the Mental Health Services Bureau to acute inpatient treatment at the Montana State Hospital or long-term care at the Montana Mental Health Nursing Care Center.

- **Mental Health Services Bureau**
  - 21,353 adults served in FY2014
  - Community based programs include Medicaid and other mental health services
  - Provider network includes licensed mental health centers, hospitals, community health centers, licensed practitioners
  - Funded with combination of General Fund, State Special Revenue, and Federal Funds
- **Montana State Hospital (Warm Springs)**
  - 807 people were served in FY2014: average daily census 187
  - State-operated inpatient psychiatric hospital and mental health group homes
  - Licensed capacity as of March 25, 2014 was 208 including 174 acute psychiatric hospital beds and 34 mental health group homes beds
  - Funded with General Fund and State Special Revenue
- **Montana Mental Health Nursing Care Center (Lewistown)**
  - 115 individuals served in FY2014: average daily census 85
  - State-operated nursing care facility
  - Licensed capacity 100 beds
  - Funded with General Fund

The ***Mental Health Services Bureau*** is responsible for delivery and reimbursement of Montana’s publicly funded community-based mental health services for adults. The bureau administers prevention and early intervention programs, crisis services, core mental health treatment and those programs that support transitions and recovery. These programs serve adults with severe disabling mental illness, co-occurring substance use disorders and those experiencing a psychiatric crisis. The bureau oversees a system of behavioral health services with community based providers. Over 21,000 individuals receive services through one of these programs, an increase of nearly 30% in the past 10 years.



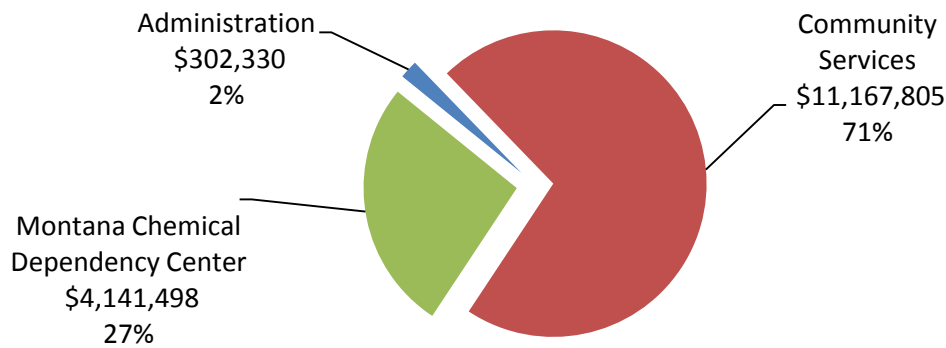
- ***Prevention and early intervention initiatives*** include community based Drop-in Centers, Peer Support Services, training and education, stakeholder engagement through Local Advisory Councils and Service Area Authority boards of directors. Investment in early intervention fosters recovery by engaging people in treatment in the least restrictive setting possible, prior to the escalation of symptoms that can often have long term effects on wellness.
- ***Crisis Intervention Services*** include the 72-hour program for presumptive eligibility, county matching grants for crisis intervention and jail diversion (HB130), secure crisis beds, and local Crisis Intervention Team (CIT) programs for law enforcement. A psychiatric crisis is when the symptoms are severe enough to require immediate care to avoid jeopardy to the life or health of the individual or others. These programs provide an alternative to the Montana State Hospital (MSH) for short-term crisis intervention, emergency detention and court ordered detention. Enabling people to access crisis services closer to home allows them to utilize the natural support of friends, family, employers and community to more quickly return to a place of stability.

- ***Core mental health services*** include Medicaid, the Mental Health Services Plan (MHSP) and two Medicaid Waivers. Medicaid mental health services are provided to those who meet both financial and disability criteria with a clinical diagnosis of severe, disabling mental illness. Under the Home and community based services (HCBS) waiver, individuals are able to receive services necessary to live in the community, including personal assistance, nursing, nutrition, habilitation, supported living and case management, in addition to other Medicaid mental health services. The Basic Medicaid Waiver (formerly known as HIFA or MHSP waiver) serves individuals with schizophrenia, bipolar disorder, and major depressive disorder. The Mental Health Bureau has requested further expansion of this program to serve all eligible adults with a severe, disabling mental illness (SDMI) diagnosis in order to provide integrated physical health and behavioral health services to all persons we serve.
- ***Transitions Programs*** include housing and household needs through the Goal 189 initiative, individualized supported employment, youth transition and forensic housing alternatives, including prerelease and group homes. Transitional needs include moving from a higher level of care; the state hospital back to a community placement; or from children's services to the adult mental health system. It may also include transitions to a more restrictive setting; an aging population moving into assisted or nursing care facilities. Transitions from the criminal justice system to the community based mental health system can also be very difficult.

***Montana State Hospital*** is the state's only public acute psychiatric hospital. MSH serves both civil and forensic patients. Admissions come through courts, emergency rooms, county attorneys, detention centers and community mental health facilities all across Montana. People committed to the hospital generally have been found to suffer from a serious mental illness, are a danger to self or others and less restrictive services are not readily available to them. The hospital continues to address the primary issues that bring about a person's involuntary commitment. Common reasons for admission include: suicidal ideation and attempts to do self-harm, discontinuation of prescribed medication; illicit drug use and alcohol abuse; or other exacerbation of their severe and persistent mental illness.

***The Montana Mental Health Nursing Care Center*** is a Medicaid licensed residential facility for long-term placement and treatment of persons who have a mental disorder and who require a level of care not available in the community; and have been turned down by other nursing homes or community placements. These persons have been determined a danger to self and others; require long-term care, and cannot benefit from the intensive psychiatric treatment available at Montana State Hospital. The facility has maintained a 4 or 5 star rating from Centers for Medicare and Medicaid Services (CMS) during the last biennium.

## 2014 Chemical Dependency Program



**The Chemical Dependency Program:** Services are provided for adolescents and adults across a continuum of care. Treatment services administered by the Chemical Dependency Bureau include prevention, intervention, inpatient and outpatient treatment, and residential services through a provider network of state-approved programs in all 56 counties. For acute treatment needs, Montana Chemical Dependency Center is a state-operated inpatient treatment facility. In FY2014, over 9,000 people received treatment services through one or more programs.

- Chemical Dependency Bureau Prevention Services
  - Focus on building infrastructure and capacity in communities to implement prevention programs addressing alcohol, tobacco, and other drug abuse
  - Funded with Federal Funds
- Chemical Dependency Bureau Treatment services for adolescents and adults
  - 8600 individuals served in FY2014
  - Inpatient and outpatient services as well as an education program for DUI offenders
  - Funded with General Fund, State Special Revenue, and Federal Funds
- Montana Chemical Dependency Center (Butte)
  - 620 individuals served in FY2014: average daily census 40.65
  - State operated inpatient treatment facility – licensed capacity 48 beds
  - Inpatient treatment for adults with alcohol and drug addictions and those with co-occurring addictions and psychiatric disorders
  - Funded with State Special Revenue

*The Chemical Dependency Bureau* is responsible for promoting substance use prevention strategies among high risk populations and providing substance abuse treatment and recovery services to Montanans in need. Prevention efforts, treatment and recovery services for substance use disorders are essential components of a public health approach to ensure optimal behavioral health for Montanans.

***Montana Chemical Dependency Center*** is a 48 bed medically managed inpatient treatment facility treating the disease of addiction and other co-existing diseases such as mental illness. The building is a new facility leased by the state of Montana. Staff include physicians, nurses, licensed mental health therapists, addiction counselors and support staff. MCDC is the highest



level of treatment for this disease and provides detox/withdrawal services for the patients. Treatment is concentrated and brief; usually with a length of stay around 23 days. Patients transition to a less restrictive level of care such as a residential home, sober living, or outpatient therapy.

**The Suicide Prevention Program:** Coordination of statewide activities, including the suicide crisis hotline, training and education in suicide awareness and prevention, and a media program to increase awareness around suicide prevention. A Suicide Mortality Review Team is coordinated through this office and has reviewed every suicide that occurred in the state since January 1, 2014; identifying interventions including reaching out to survivors and providing immediate resources. The Montana Suicide Prevention Lifeline averages approximately 300 suicide-specific phone calls a month between the two regional call centers.

- Crisis Intervention
  - 16% increase in the volume of calls
- Training
  - 50% increase in requests for community trainings
  - Applied Suicide Intervention Skills (ASIST) training has been provided to more than 500 people around the state
  - Question, Persuade, and Refer (QPR) trainings provided around the state for teachers, nurses, physicians, law enforcement, college students, senior caregivers, mental health professionals, and tribal communities, resulting in more than 1,800 people trained
  - Mental Health First Aid (MHFA) has been provided to 12 communities around the state, resulting in nearly 400 people being trained
- Veterans
  - Sponsored Military Appreciation games at the University of Montana and Montana State University and provided depression screening brochures to over 40,000 people
  - Sponsored a statewide Facebook campaign concerning veteran suicide. The campaign reached more than 290,000 people with more than 133,000 identified as military. More than 4,500 clicked through to the state suicide prevention website for additional resources
- Youth
  - Continue to provide evidence-based suicide prevention toolkits to Montana secondary schools along with providing QPR training to educational staff at schools around the state. Also provide training to education students at Western Montana College and school counseling students at the University of Montana
- Detention and Law Enforcement
  - Collaboration with the Montana Association of Counties on implementing a standardized suicide risk screening tool in all county jails and detention centers.
  - The national MHFA curriculum is now part of the core curriculum at the Montana Law Enforcement Academy, along with QPR, for all officers and detention staff
- Grants
  - \$220,000 in community grants have been distributed to counties and reservations to implement suicide prevention programs

## OUTCOMES AND ACCOMPLISHMENTS DURING THE 2014 BIENNIUM:

- Since 2009, community programs funded through the Mental Health Services Bureau have reduced short-term crisis admissions to MSH by 50% as a percentage of overall admissions. In 2009, emergency and court ordered detentions accounted for 434 of the 739 total admissions; over 58% of the total. In FY2014, the hospital saw only 184 of these short-term admissions, less than 30% of the 626 overall admissions.
- Through the contributing efforts of Community Program Officers, new Local Advisory Councils have been developed in Blaine, Broadwater, and Powder River counties as well as a Tri-County group in Powell, Deer Lodge, Granite, and Madison counties. Sheridan County is in the preliminary stages of LAC development.
- The Basic Medicaid Waiver (formerly known as HIFA or MHSP waiver) was approved by the Center for Medicare and Medicaid Services (CMS) for implementation on December 1, 2010, and was expanded in January 2014; more than doubled the number of people eligible for an integrated physical and mental health benefit. This waiver provides essential health coverage through basic Medicaid benefits for up to 2,000 individuals.
- Secured federal grant funds to create programs to increase access to health care services for returning veterans; increasing telehealth capacity in more than 45 rural communities and providing access to needed community resources through an online resource guide. [www.MontanaVeteranConnection.com](http://www.MontanaVeteranConnection.com)
- Supported CIT programs in Bozeman, Hamilton, Helena and Billings. Grant funding supported professional development of emerging and established CIT training teams from several communities. To date, more than 600 officers have been trained statewide, but established teams and programs only exist in 4 counties.
- Implemented three new supported employment programs, funded through federal mental health block grant dollars. The programs are backed with technical assistance through Dartmouth University and meet the fidelity requirements of an evidence based program.
- Youth transition pilot project has been launched in partnership with the Children's Mental Health Bureau that provides linkages across the children's and adult systems while teaching teens and young adults independent living skills for long-term success.
- Eased overcrowding on the Forensic Unit at Montana State Hospital. On March 25, 2014, the hospital opened an additional 8-bed mental health group home on the State Hospital Campus. This home was opened to provide a less restrictive treatment alternative and to ease the overcrowding on the Forensic Unit at the State Hospital. The McCollom House is one of four group homes on the campus with a total capacity of 34 licensed beds to meet the needs of the hospital population.
- Secured federal grant to address and prevent underage drinking and prescription drug misuse among Montana youth. The grant supports evidence-based prevention programs to be implemented in all 56 counties and 7 Tribal reservations over the next five years. Reward and Reminder is one evidence-based prevention program being implemented as part of this grant to educate retailers on checking identification when selling alcoholic beverages to make sure the buyer is age 21 and older.



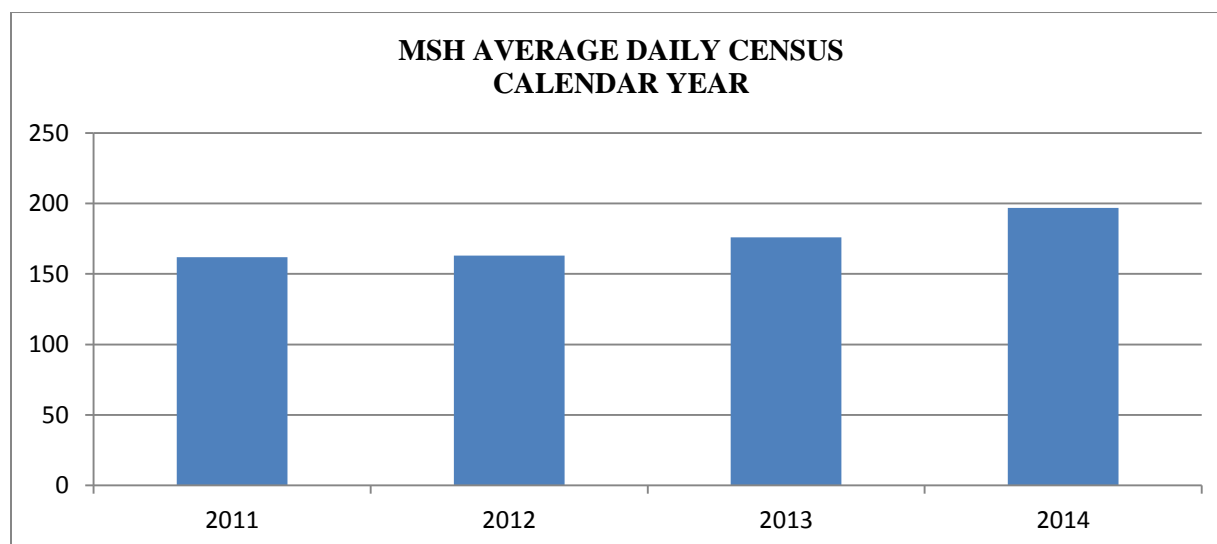
## **CHALLENGES**

While many accomplishments and improvements have occurred, the division continues to face challenges in delivering quality, compassionate and appropriate services to those most in need. An aging population will require investment in services to meet the needs of dementia and geriatric patients. Returning combat veterans have unique treatment needs and more than half of the state's veterans are ineligible or not enrolled in VA Healthcare Services, thus are served by local, community providers. More than 5,000 veterans are expected to return to Montana in the coming years.

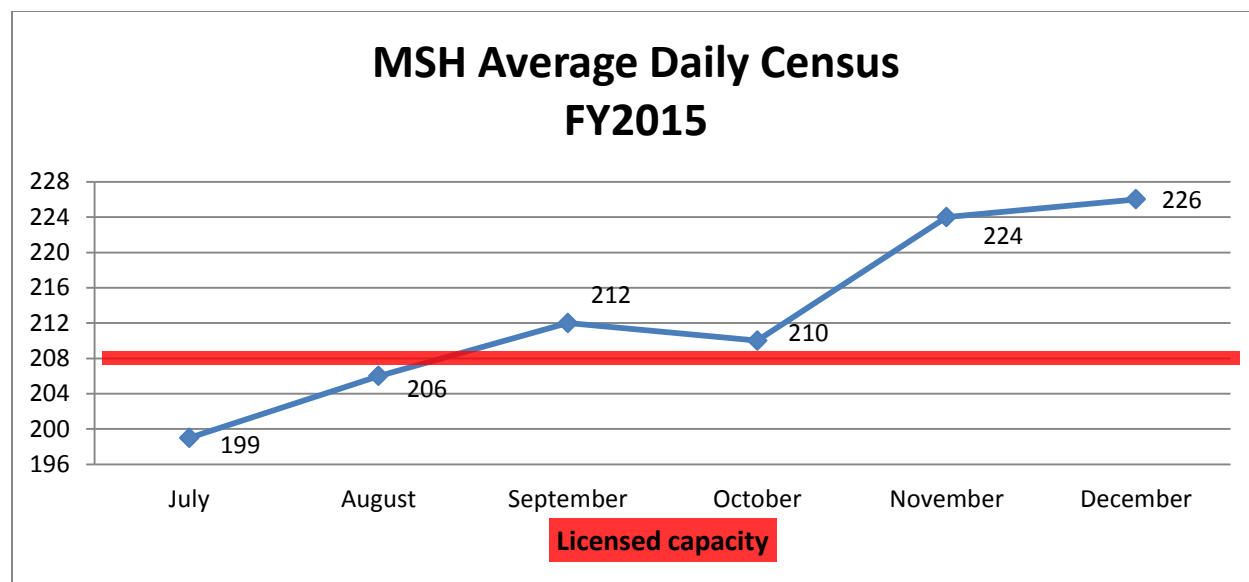
Crisis services are available in very limited locations and the demand for these services continues to escalate. In addition to an increase in overall numbers, the acuity of these patients is also on the rise. The impacts of substance abuse, synthetic drugs and other chronic health conditions make these extremely difficult cases to treat. Population centers have shifted with the oil exploration in eastern Montana and many rural communities are struggling to adequately serve the crisis and ongoing behavioral health treatment needs of their new residents.

The number of persons with dementia related diagnoses served at Montana State Hospital has increased. There were 24 persons in 2012, 35 in 2013 and 47 in 2014. The Montana Mental Health Nursing Care Center had 23 admissions from May 2014 to October 2014. Fifteen had a diagnosis of dementia, eight were from Montana State Hospital and seven were from hospitals or the VA across the state. Montana Mental Health Nursing Care Center asks the referring party to demonstrate that the person they refer has been turned down by at least three other facilities. Denials from other facilities have been due to behaviors, risk of aggression, unable to meet patient needs, combativeness, sex offender, unsafe, cannot meet psychiatric needs, and an unsuccessful pre-placement visit. Denials have been from facilities across the state, i.e. Great Falls, Butte, Livingston, Glendive, Deer Lodge, Billings, Libby, Eureka, and Kalispell. A resident's wife commented, "I can't thank you enough for the excellent care he has had here. I was so afraid you wouldn't keep him after his other placements failed. I wanted him closer to home. I wanted to care for him myself, but I could not keep him safe."

The average daily census at the Montana State Hospital has grown dramatically since the last legislative session. At the time of the last legislative session the hospital was boasting an average daily census of 154.5. The average daily census for FY2014 ending June 30, 2014 was 187. This represents a 21% increase and is the equivalent of adding more than 32 patients per day in the care of the hospital during the past year.

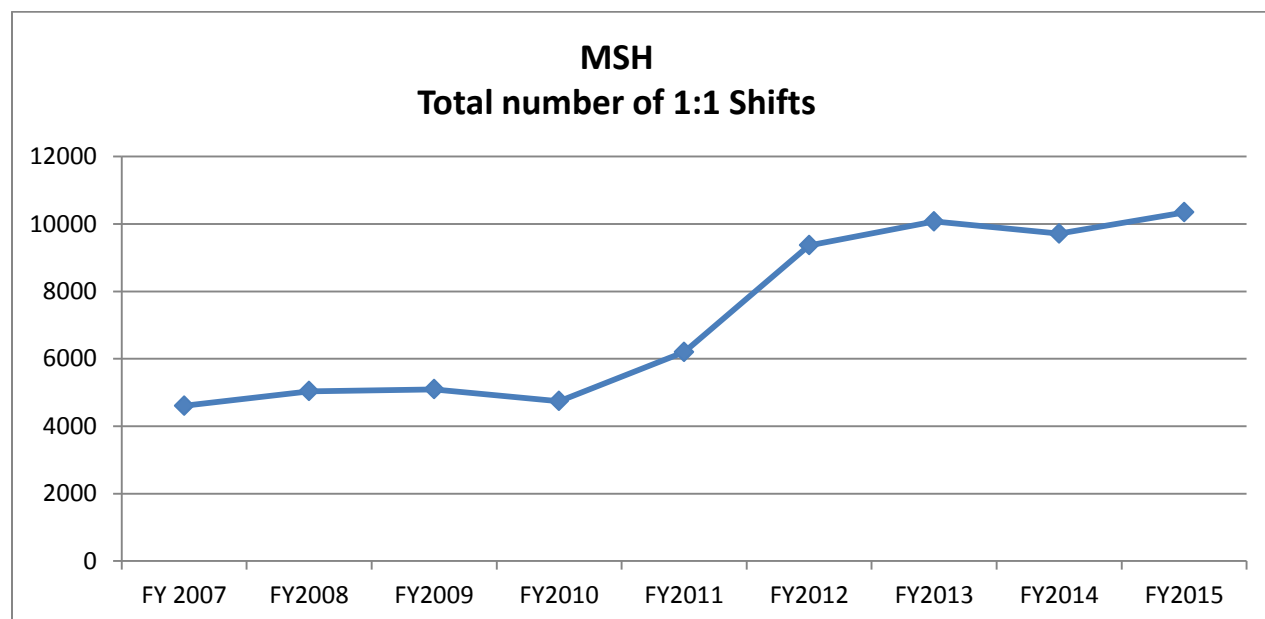


Montana State Hospital is unable to refuse, delay, or defer admissions, except emergency detentions, from the courts regardless of the hospital census or ability to safely serve patients. No other provider or partner in the mental health system has these same requirements. The census has continued to steadily rise in FY2015.



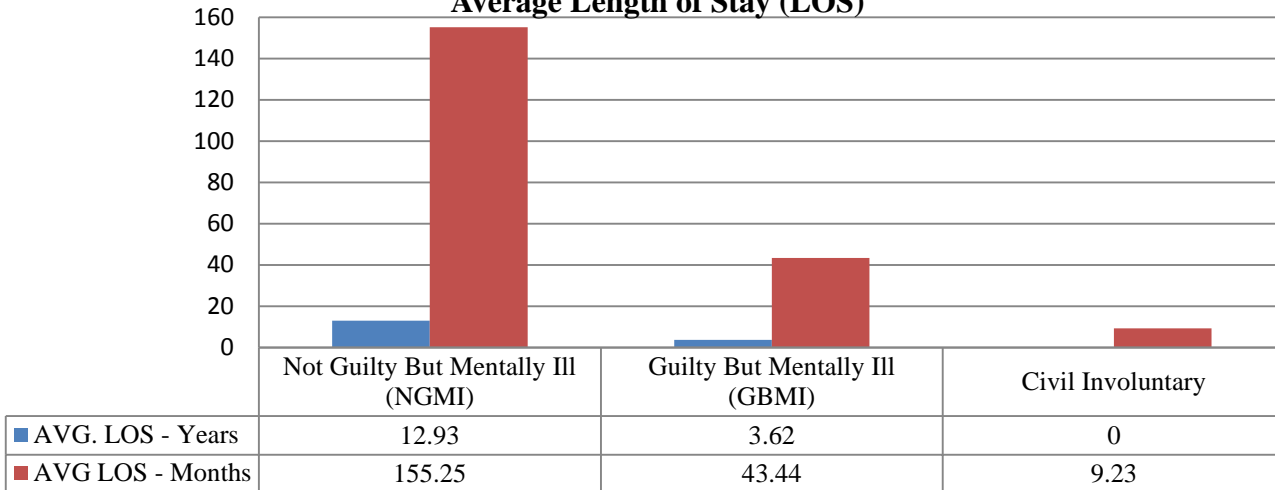
The acuity levels for patients at MSH has continued to rise which has increased the need for 1 staff to 1 patient per 8 hour shift. In some cases there has been a need for 2 staff to 1 patient.

- 1:1 are used when Patient Acuity rises, which means increased symptoms requiring increased monitoring and care
- Prevention of suicide – Patients evaluated to be at significant risk for suicide are placed on 1:1
- Prevention of violence – Patients evaluated at risk of assaulting staff or other patients are placed on 1:1 or sometimes 2:1



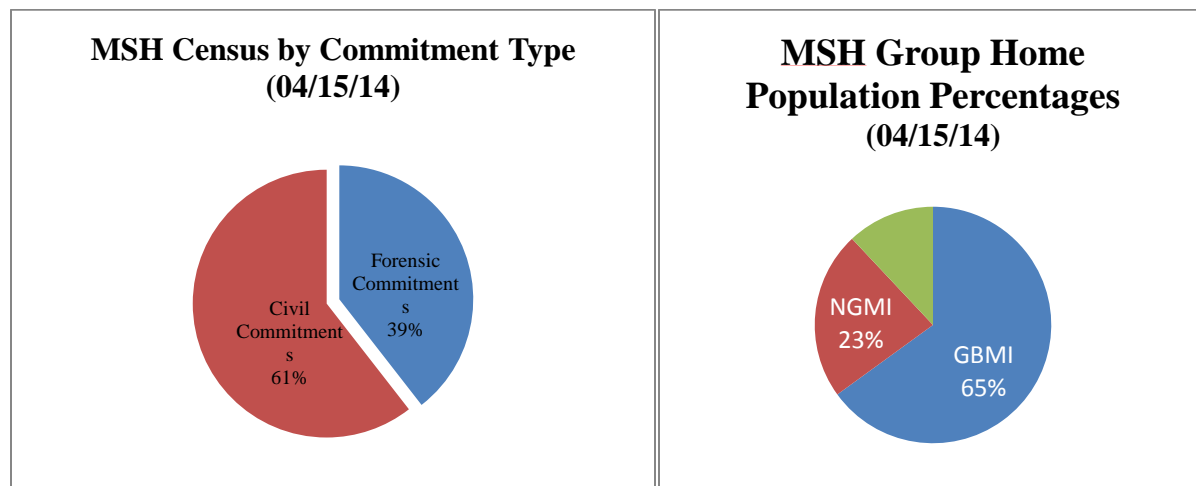
Once persons under a forensic commitment for serious crimes committed as a result of mental illness enter Montana State Hospital, lengths of stay can vary from a few months to a lifetime. For forensic patients, as well as involuntary committed patients, decisions are made by courts and not by the hospital.

**Montana State Hospital  
Average Length of Stay (LOS)**



1 patient =	4 patients =	16 patients
No probation/parole available	Probation or parole possible after serving 25% of sentence	Community placement possible when no longer danger to self or others

The Montana State Hospital forensic population continues to lead to overcrowding and an unsafe environment for patients and staff. As noted in the July 2014 publication by the National Association of State Mental Health Program Directors titled, The Vital Role of State Psychiatric Hospitals: “It is the duty of the state psychiatric hospital to make reasonable efforts to create environments in which service recipients and staff are as safe as possible. One way to address this safety is to create high security units for service recipients who are at high risk for aggression and violence, ensuring that building structures have clear sight lines, cameras, and adequate staffing.”

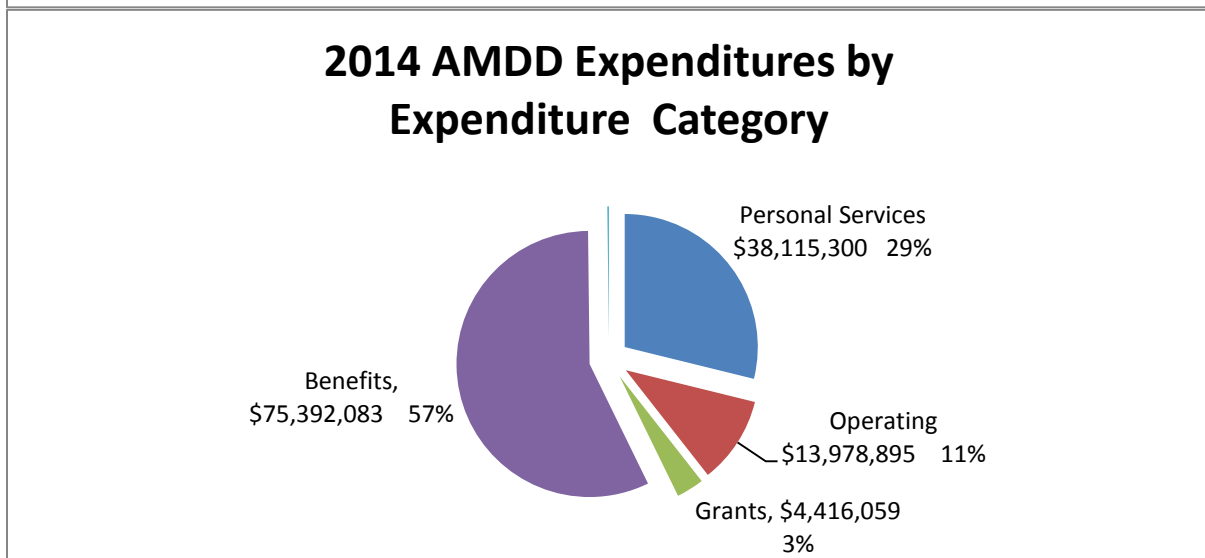
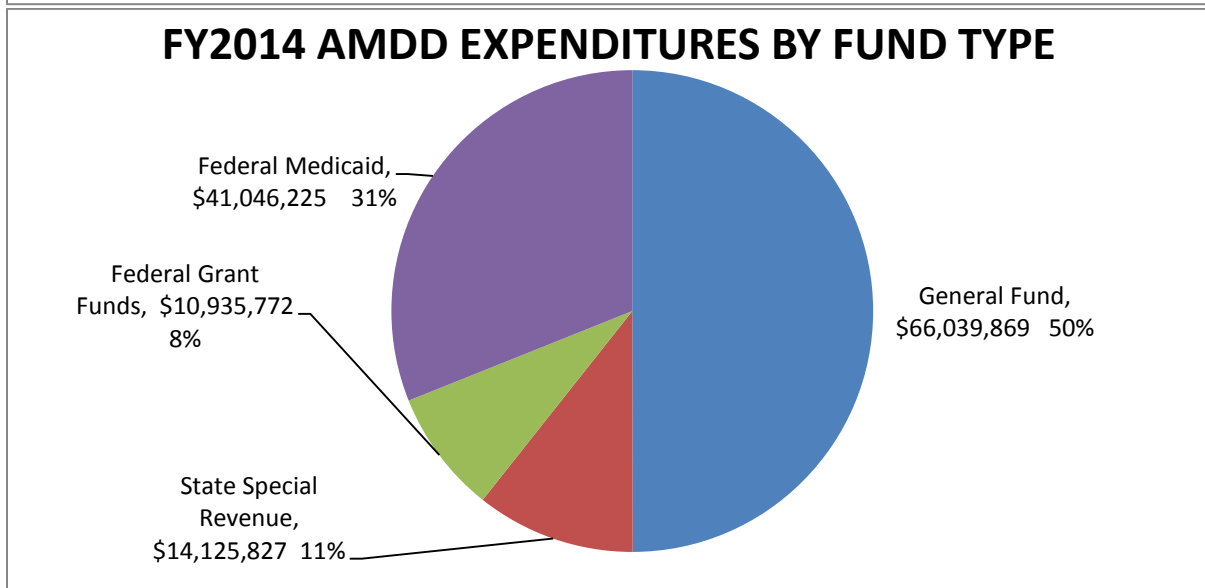
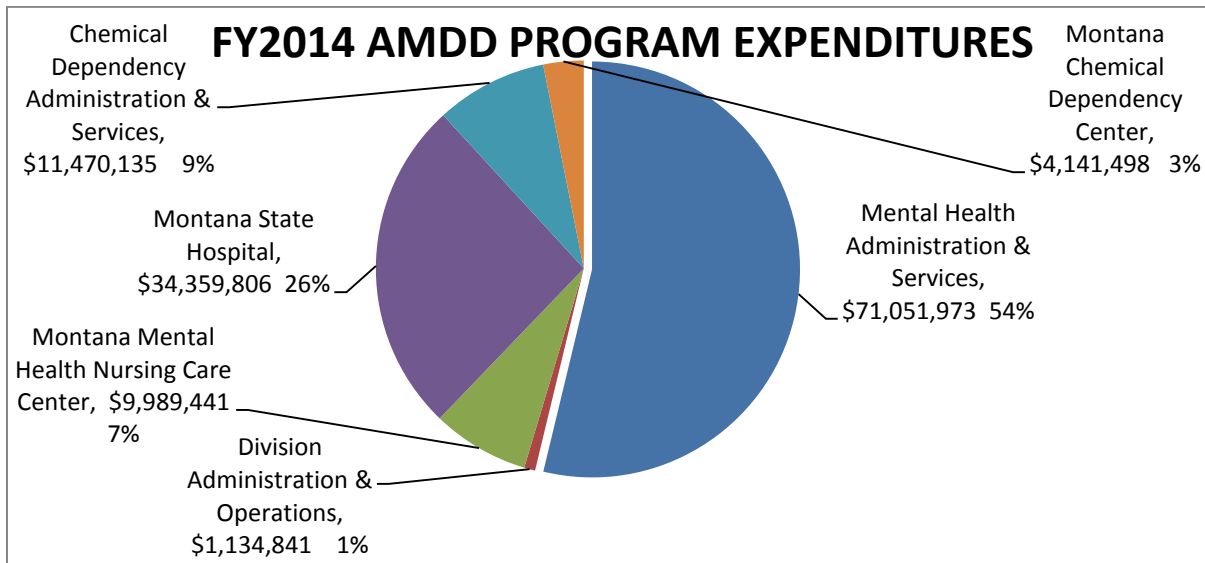


## 2015 BIENNIUM GOALS AND OBJECTIVES

<b>Department of Public Health and Human Services Addictive and Mental Disorders Division</b>	
<b>Goals and Objectives for the 2015 Biennium Submitted November 14, 2014</b>	
<b>Goal:</b> Provide services in appropriate settings that sustain and improve the lives of individuals with mental illness and addictive disorders	
<b>Objective</b>	<b>Measures</b>
Support a community-based system of care for adults	Increased utilization of community based crisis intervention services reduces short term admissions to Montana State Hospital
Provide and reimburse for effective prevention and treatment that enables sustainable recovery in communities	Through quality assurance activities and analysis, the division determines whether direction and support is given to providers for delivery of recovery-focused services.
Improve outcomes for individuals with serious mental illness and co-occurring substance use disorders	Data collection on individual client outcomes show positive trends in recovery markers and performance measures
Improve collaboration between community mental health providers, nursing homes and state facilities	A 10% increase in state facility discharge rates with a corresponding 10% decrease in client's recidivism to state facilities.

<b>Funding and FTE Information</b>			
	<b>FY2014 Actual Expenditures</b>	<b>FY2016 Request</b>	<b>FY2017 Request</b>
<b>Addictive and Mental Disorders Division</b>			
<b>FTE</b>	614.86	622.86	695.56
<b>Personal Services</b>	38,092,489.00	43,129,421.00	47,203,068.00
<b>Operating</b>	13,538,426.00	15,641,966.00	17,376,685.00
<b>Equipment</b>	107,061.00	107,061.00	107,061.00
<b>Grants and Local Assistance</b>	3,696,524.00	5,271,524.00	5,271,524.00
<b>Benefits and Claims</b>	75,392,087.00	94,420,556.00	99,231,657.00
<b>Transfers</b>	24,300.00	17,800.00	17,800.00
<b>Debt Services</b>	113,994.00	117,093.00	122,562.00
<b>Total Request</b>	130,964,881.00	158,705,421.00	169,330,357.00
	<b>FY2014 Funding Sources</b>	<b>FY2016 Request</b>	<b>FY2017 Request</b>
<b>General Fund</b>	66,023,522.00	78,823,831.00	86,477,732.00
<b>State Special Fund</b>	14,125,830.00	15,747,203.00	16,150,769.00
<b>Federal Fund</b>	50,815,529.00	64,134,387.00	66,701,856.00
<b>Total Request</b>	130,964,881.00	158,705,421.00	169,330,357.00

**THE FOLLOWING FIGURES PROVIDE FUNDING AND EXPENDITURE INFORMATION  
FOR FY 2014 FOR THE ADDICTIVE AND MENTAL DISORDERS DIVISION**



## CHANGE PACKAGES

### NP 3333319 Expand Community Mental Health Services (RST)

- This new proposal is a Mental Health Initiative to enhance Community Mental Health Services.
- A comprehensive package of community based services across a continuum of care, designed to serve people in the least restrictive setting possible.
- Initiative includes funding to support all four programmatic areas: Prevention/Early Intervention (drop-in centers, peer support services), Crisis (expansion of local 72-hour crisis intervention, CIT programs, county matching grants for crisis intervention and jail diversion, secure crisis beds), Essential (return of county IGT/state special revenue to local governments to support local services) and Transition (housing, re-entry, community based forensic examination and supported employment).

Fiscal Year	General Fund	State Special	Federal Funds	Total Request
FY 2016	\$3,548,673	\$(1,049,904)	\$	\$2,498,769
FY 2017	\$3,798,673	\$(1,049,904)	\$	\$2,748,769
Biennium Total	\$7,347,346	\$(2,099,808)	\$	\$5,247,538

### NP 3333320 Med Ben MFP AMDD Community Placements

- This new proposal provides additional slots for the HCBS SDMI waiver through the Money Follows the Person Program.
- This request provides an additional nine slots in FY 16 and 15 slots in FY 17.
- This request is for an increase of \$60,604 state special revenue funds and \$114,653 in federal funds in FY 16 and \$102,204 in state special revenue funds and \$189,891 in federal funds in FY 17.

Fiscal Year	General Fund	State Special	Federal Funds	Total Request
FY 2016	\$	\$ 60,604	\$114,653	\$ 175,257
FY 2017	\$	\$102,204	\$189,891	\$ 292,095
Biennium Total	\$	\$162,808	\$304,544	\$ 467,352

### NP 3333501 McCollom Group Home Staffing MSH

- This new proposal provides personal services budget to safely operate the McCollum Group Home at the Montana State Hospital.
- This request will alleviate overcrowding on the forensic unit and provide a less restrictive environment for forensic patients.

Fiscal Year	General Fund	State Special	Federal Funds	Total Request
FY 2016	\$ 515,583	\$	\$	\$ 515,583
FY 2017	\$ 512,356	\$	\$	\$ 512,356
Biennium Total	\$1,027,939	\$	\$	\$1,027,939



**NP 3333502 Occupational Therapist MSH**

- This new proposal provides necessary services to an increasing population of older, physically, as well as mentally challenged individuals.
- This request provides the needed services in a more reasonable time frame.
- This request provides services without interruption due to employee leave and reduces the wait time for individuals receiving services.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$ 63,215	\$	\$	\$ 63,215
FY 2017	\$ 63,215	\$	\$	\$ 63,215
Biennium Total	\$126,430	\$	\$	\$126,430

**NP 3333504 B Wing Dementia Unit MMHNCC**

- This new proposal funds a new 25 bed dementia unit at the Montana Mental Health Nursing Care Center.
- 29.2 FTE requested.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	\$	\$	\$
FY 2017	\$2,005,077	\$	\$	\$2,005,077
Biennium Total	\$2,005,077	\$	\$	\$2,005,077

**NP 3333505 Forensic Unit D Wing Montana State Hospital**

- This new proposal request additional funding for expansion of the Forensic Unit D Wing at the Montana State Hospital.
- This request will help alleviate overcrowding on the wing.
- This request creates a more effective and safe treatment environment for forensic patients.
- This request provides a space for containing aggressive patients swiftly and safely.
- This request decreases the need for intervention by a high profile corrections operation.
- 43.5 FTE requested.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	\$	\$	\$
FY 2017	\$2,980,827	\$	\$	\$2,980,827
Biennium Total	\$2,980,827	\$	\$	\$2,980,827

**NP 3333901 PRI – CD SAPT Block Grant**

- This new proposal requests a 2% provider rate increase in each year of the biennium for the Chemical Dependency Block Grant service providers.
- The funding over the biennium is \$368,649 in federal funds.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	\$	\$121,266	\$121,266
FY 2017	\$	\$	\$247,383	\$247,383
Biennium Total	\$	\$	\$368,649	\$368,649

**NP 3333902 PRI – Medicaid Ben Waiver Services**

- This new proposal requests a 2% provider rate increase in each year of the biennium for the Medicaid Home and Community Based Services Waiver and the MHSP HIFA providers.
- This decision package requests \$943,430 in total funds. The funding over the biennium is \$328,833 in general fund and \$614,597 in federal funds.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$107,315</b>	<b>\$</b>	<b>\$203,024</b>	<b>\$ 310,339</b>
<b>FY 2017</b>	<b>\$221,518</b>	<b>\$</b>	<b>\$411,573</b>	<b>\$633,091</b>
<b>Biennium Total</b>	<b>\$328,833</b>	<b>\$</b>	<b>\$614,597</b>	<b>\$943,430</b>

**NP 3333903 PRI – Medicaid Ben AMDD Chemical Dependency**

- This new proposal requests a 2% provider rate increase in each year of the biennium for the Medicaid benefit for Chemical Dependency service providers.
- This decision package requests \$133,109 in total funds. The funding over the biennium is \$46,395 in state special and \$86,714 in federal funds.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$</b>	<b>\$15,141</b>	<b>\$28,645</b>	<b>\$ 43,786</b>
<b>FY 2017</b>	<b>\$</b>	<b>\$31,254</b>	<b>\$58,069</b>	<b>\$ 89,323</b>
<b>Biennium Total</b>	<b>\$</b>	<b>\$46,395</b>	<b>\$86,714</b>	<b>\$133,109</b>

**NP 3333904 PRI – Medicaid Ben AMDD Mental Health**

- This new proposal requests a 2% provider rate increase in each year of the biennium for the Medicaid benefit for Mental Health service providers.
- This decision package requests \$2,710,552 in total funds. The funding over the biennium is \$944,766 in general fund and \$1,765,786 in federal funds.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$308,325</b>	<b>\$</b>	<b>\$ 583,304</b>	<b>\$ 891,629</b>
<b>FY 2017</b>	<b>\$636,441</b>	<b>\$</b>	<b>\$1,182,482</b>	<b>\$1,818,923</b>
<b>Biennium Total</b>	<b>\$944,766</b>	<b>\$</b>	<b>\$1,765,786</b>	<b>\$2,710,552</b>

**NP 3333905 PRI – MHSP Services**

- This new proposal requests a 2% provider rate increase in each year of the biennium for the MHSP service providers.
- This decision package requests \$438,909 in total funds. The funding over the biennium is \$355,975 in general fund and \$82,934 in federal funds.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$117,097</b>	<b>\$</b>	<b>\$27,281</b>	<b>\$144,378</b>
<b>FY 2017</b>	<b>\$238,878</b>	<b>\$</b>	<b>\$55,653</b>	<b>\$294,531</b>
<b>Biennium Total</b>	<b>\$355,975</b>	<b>\$</b>	<b>\$82,934</b>	<b>\$438,909</b>

**NP 3333906 PRI – Intensive Community Support Services**

- This new proposal requests a 2% provider rate increase in each year of the biennium for Intensive Community Service providers.
- The funding over the biennium is \$132,901 in general fund.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$ 43,717</b>	<b>\$</b>	<b>\$</b>	<b>\$ 43,717</b>
<b>FY 2017</b>	<b>\$ 89,184</b>	<b>\$</b>	<b>\$</b>	<b>\$ 89,184</b>
<b>Biennium Total</b>	<b>\$132,901</b>	<b>\$</b>	<b>\$</b>	<b>\$132,901</b>

**NP 3333907 PRI – RTEC Meth Substance Abuse**

- This new proposal requests a 2% provider rate increase in each year of the biennium for RTEC Meth substance abuse community service providers.
- The funding over the biennium is \$122,691 in general fund.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$ 40,359</b>	<b>\$</b>	<b>\$</b>	<b>\$ 40,359</b>
<b>FY 2017</b>	<b>\$ 82,332</b>	<b>\$</b>	<b>\$</b>	<b>\$ 82,332</b>
<b>Biennium Total</b>	<b>\$122,691</b>	<b>\$</b>	<b>\$</b>	<b>\$122,691</b>

**PL 3300444 Statewide 4% FTE Reduction –Program 33**

- This request makes permanent a 4% vacancy savings reduction by eliminating 2 FTE in the Addictive and Mental Disorder program...
- This request is for a decrease of \$50,470 general fund, \$18,652 state special revenue and \$40,595 of federal funds for FY 2016 and a decrease of 50,478 general fund, \$18,655 state special revenue and \$40,602 of federal funds for FY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$ (50,470)</b>	<b>\$(18,652)</b>	<b>\$(40,595)</b>	<b>\$(109,717)</b>
<b>FY 2017</b>	<b>\$ (50,478)</b>	<b>\$(18,655)</b>	<b>\$(40,602)</b>	<b>\$(109,735)</b>
<b>Biennium Total</b>	<b>\$(100,948)</b>	<b>\$(37,307)</b>	<b>\$(81,197)</b>	<b>\$(219,452)</b>

**PL 3333101 Med Ben Waiver FMAP HIFA MHSP**

- This request adjusts SFY 2014 FMAP (federal medical assistance participation) rate of 33.75% state funds and 66.25% federal funds to the SFY 2016 FMAP rate of 34.58% state funds and 65.42% federal funds, and the SFY 2017 FMAP rate of 34.99% state funds and 65.01% federal funds.
- This request is for an increase of \$98,622 in state special revenue funds and a decrease of \$98,622 in federal funds in SFY 2016, an increase of \$130,845 in state special revenue funds and a decrease of \$130,845 in federal funds in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2016</b>	<b>\$</b>	<b>\$ 98,622</b>	<b>\$ (98,622)</b>	<b>\$ 0</b>
<b>FY 2017</b>	<b>\$</b>	<b>\$130,845</b>	<b>\$(130,845)</b>	<b>\$ 0</b>
<b>Biennium Total</b>	<b>\$</b>	<b>\$229,467</b>	<b>\$(229,467)</b>	<b>\$ 0</b>

**PL 3333102 Med Ben Core FMAP Adult MH**

- This present law adjustment maintains existing services for the Adult Mental Health program.
- This request adjusts SFY 2014 FMAP (federal medical assistance participation) rate of 33.75% state funds and 66.25% federal funds to the SFY 2016 FMAP rate of 34.58%

state funds and 65.42% federal funds, and the SFY 2017 FMAP rate of 34.99% state funds and 65.01% federal funds.

- This request is for an increase of \$334,052 in general fund, an increase of \$84,804 in state special revenue funds and a decrease of \$418,856 in federal funds in SFY 2016, an increase of \$443,198 in general fund, an increase of \$112,512 in state special revenue funds and a decrease of \$555,710 in federal funds in SFY 2017. Total cost for the program does not change.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$334,052</b>	<b>\$ 84,804</b>	<b>\$(418,856)</b>	<b>\$ - 0 -</b>
FY 2017	<b>\$443,198</b>	<b>\$112,512</b>	<b>\$(555,710)</b>	<b>\$ - 0 -</b>
Biennium Total	<b>\$777,250</b>	<b>\$197,316</b>	<b>\$(974,566)</b>	<b>\$ - 0 -</b>

#### **PL 3333103 Med Ben Core FMAP CD**

- This present law adjustment maintains existing services for the Adult Chemical Dependency program.
- This request adjusts SFY 2014 FMAP (federal medical assistance participation) rate of 33.75% state funds and 66.25% federal funds to the SFY 2016 FMAP rate of 34.58% state funds and 65.42% federal funds, and the SFY 2017 FMAP rate of 34.99% state funds and 65.01% federal funds.
- This request is for an increase of \$20,557 in state special revenue funds and a decrease of \$20,557 in federal funds in SFY 2016, an increase of \$27,273 in state special revenue funds and a decrease of \$27,273 in federal funds in SFY 2017. Total cost for the program does not change.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$</b>	<b>\$20,557</b>	<b>\$(20,577)</b>	<b>\$ - 0 -</b>
FY 2017	<b>\$</b>	<b>\$27,273</b>	<b>\$(27,273)</b>	<b>\$ - 0 -</b>
Biennium Total	<b>\$</b>	<b>\$47,830</b>	<b>\$(47,830)</b>	<b>\$ - 0 -</b>

#### **PL 3333104 Med Ben Waiver FMAP HCBS**

- This present law adjustment maintains existing services for the Home and Community Based Waiver program.
- This request adjusts SFY 2014 FMAP (federal medical assistance participation) rate of 33.75% state funds and 66.25% federal funds to the SFY 2016 FMAP rate of 34.58% state funds and 65.42% federal funds, and the SFY 2017 FMAP rate of 34.99% state funds and 65.01% federal funds.
- This request is for an increase of \$34,940 in state special revenue funds and a decrease of \$34,940 in federal funds in SFY 2016, an increase of \$46,356 in state special revenue funds and a decrease of \$46,356 in federal funds in SFY 2017. Total cost for the program does not change.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$</b>	<b>\$34,940</b>	<b>\$(34,940)</b>	<b>\$ - 0 -</b>
FY 2017	<b>\$</b>	<b>\$46,356</b>	<b>\$(46,356)</b>	<b>\$ - 0 -</b>
Biennium Total	<b>\$</b>	<b>\$81,296</b>	<b>\$(81,296)</b>	<b>\$ - 0 -</b>

**PL 3333105 Med Ben Core Cloud Adult MH**

- This present law adjustment for caseload growth in the Adult Mental Health program covers the increase in the number of eligible people, utilization, acuity level and cost per service.
- This request is for an increase of \$1,893,704 general fund and \$3,566,803 of federal funds for FY 2016 and an increase of \$2,845,902 general fund, and \$5,282,923 of federal funds for FY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$1,893,704</b>	\$	<b>\$3,566,803</b>	<b>\$ 5,460,507</b>
FY 2017	<b>\$2,845,902</b>	\$	<b>\$5,282,923</b>	<b>\$ 8,128,825</b>
Biennium Total	<b>\$4,739,606</b>	\$	<b>\$8,849,726</b>	<b>\$13,589,332</b>

**PL 3333106 Med Ben Core Cloud Chem Dep**

- This present law adjustment for caseload growth in the Adult Chemical Dependency program covers the increase in the number of eligible people, utilization, acuity level and cost per service.
- This request is for an increase of \$91,921 state special revenue and \$173,134 of federal funds for FY 2016 and an increase of \$133,636 state special revenue and \$248,071 of federal funds for FY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	<b>\$ 91,921</b>	<b>\$173,134</b>	<b>\$265,055</b>
FY 2017	\$	<b>\$133,636</b>	<b>\$248,071</b>	<b>\$381,707</b>
Biennium Total	\$	<b>\$225,557</b>	<b>\$421,205</b>	<b>\$646,762</b>

**PL 3333108 Med Ben Waiver Cloud HCBS**

- This present law adjustment for caseload growth in the Home and Community Based Services Waiver program covers the increase in the number of eligible people, utilization, acuity level and cost per service.
- This request is for an increase of \$163,683 state special revenue and \$309,664 of federal funds for FY 2016 and an increase of \$165,624 state special revenue and \$307,723 of federal funds for FY 2017

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	<b>\$163,683</b>	<b>\$309,664</b>	<b>\$473,347</b>
FY 2017	\$	<b>\$165,624</b>	<b>\$307,723</b>	<b>\$473,347</b>
Biennium Total	\$	<b>\$329,307</b>	<b>\$617,387</b>	<b>\$946,694</b>

**PL 3333303 Med Ben Waiver HIFA MHSP**

- This present law adjustment expands existing services for the HIFA Waiver program to up to 6,000 individuals. The HIFA Waiver program offers enhanced services including physical health and enhanced pharmacy benefits.
- This request accounts for the transition of individuals from the MHSP program to the HIFA Waiver program.
- This request leaves \$1,000,000 in the general fund for the MHSP program for individuals that do not qualify for the HIFA Waiver program.
- This request is for an increase of \$718,125 in state special revenue funds and an increase of \$9,596,935 in federal funds in SFY 2016, an increase of \$818,862 in state special revenue funds and an increase of \$9,496,198 in federal funds in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	\$ 718,125	\$ 9,596,935	\$10,315,060
FY 2017	\$	\$ 818,862	\$ 9,496,198	\$10,315,060
Biennium Total	\$	\$1,536,987	\$19,093,133	\$20,630,120

#### **PL 3333304 MMHNCC Overtime/Holiday/Differential**

- This present law adjustment funds overtime, holidays worked, differential pay, aggregate costs, and the corresponding benefits for the Montana Mental Health Nursing Care Center (MMHNCC) in Lewistown.
- This request provides required staffing levels for the 24/7 facility to maintain safety and provide quality care.
- This request is for an increase of \$699,081 in general fund in SFY 2016 and an increase of \$709,041 in general fund in SFY 2017.
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<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$ 699,081	\$	\$	\$ 699,081
FY 2017	\$ 709,041	\$	\$	\$ 709,041
Biennium Total	\$1,408,122	\$	\$	\$1,408,122

#### **PL 3333305 MCDC Overtime/Holiday/Differential**

- This present law adjustment funds overtime, holidays worked, differential pay, aggregate costs, and the corresponding benefits for the Montana Chemical Dependency Center (MCDC) in Butte.
- This request provides required staffing levels for the 24/7 facility to maintain safety and provide quality care
- This request is for an increase of \$258,527 in state special revenue in SFY 2016 and an increase of \$261,929 state special revenue in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	\$258,527	\$	\$258,527
FY 2017	\$	\$261,929	\$	\$261,929
Biennium Total	\$	\$520,456	\$	\$520,456

#### **PL 3333306 MSH Overtime/Holiday/Differential**

- This present law adjustment funds overtime, holidays worked, differential pay, aggregate costs, and the corresponding benefits for the Montana State Hospital (MSH) in Warm Springs
- This request provides required staffing levels for the 24/7 facility to maintain safety and provide quality care
- This request is for an increase \$1,650,000 in general fund in both SFY 2016 and in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$1,650,000	\$	\$	\$1,650,000
FY 2017	\$1,650,000	\$	\$	\$1,650,000
Biennium Total	\$3,300,000	\$	\$	\$3,300,000



**PL 33 33307 Facility Inflation MMHNCC**

- This present law inflationary adjustment maintains the existing level of laboratory, laundry, pharmacy, food, and outside medical and dental service for the Montana Mental Health Nursing Care Center (MMHNCC) in Lewistown.
- This request is for an increase of \$281,884 in general fund in SFY 2016 and an increase in general fund of \$454,390 in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$281,884</b>	\$	\$	<b>\$281,884</b>
FY 2017	<b>\$454,390</b>	\$	\$	<b>\$454,390</b>
Biennium Total	<b>\$736,274</b>	\$	\$	<b>\$736,274</b>

**PL 3333308 Facility Inflation MCDC**

- This present law inflationary adjustment maintains the existing level of laboratory, laundry, pharmacy, food, and outside medical and dental service for the Montana Chemical Dependency Center (MCDC) in Butte
- This request is for an increase of \$220,696 in state special revenue in SFY 2016 and an increase of \$356,905 in state special revenue in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	<b>\$220,696</b>	\$	<b>\$220,696</b>
FY 2017	\$	<b>\$356,905</b>	\$	<b>\$356,905</b>
Biennium Total	\$	<b>\$577,601</b>	\$	<b>\$577,601</b>

**PL 3333309 Facility Inflation MSH**

- This present law inflationary adjustment maintains the existing level of laboratory, laundry, pharmacy, food, and outside medical and dental service for the Montana State Hospital at Warm Springs.
- This request is for an increase of \$1,001,457 in general fund in SFY 2016 and an increase of \$1,697,193 in general fund in SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	<b>\$1,001,457</b>	\$	<b>\$1,001,457</b>
FY 2017	\$	<b>\$1,697,193</b>	\$	<b>\$1,697,193</b>
Biennium Total	\$	<b>\$2,698,650</b>	\$	<b>\$2,698,650</b>

**PL 3333310 McCollom Group Home MSH**

- This present law adjustment annualizes the cost to operate the McCollom group home that opened the spring of 2014 to alleviate overcrowding on the forensic unit and provide a less restrictive environment for forensic patients.
- This request is for \$160,555 general fund in both SFY 2016 and SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$160,555</b>	\$	\$	<b>\$160,555</b>
FY 2017	<b>\$160,555</b>	\$	\$	<b>\$160,555</b>
Biennium Total	<b>\$321,110</b>	\$	\$	<b>\$321,110</b>

**PL 3333311 AMDD Suicide Mortality Review Team - OTO**

- This present law adjustment maintains existing services for the suicide mortality review team mandated by the 2013 legislature in HB 583 and that is statutorily required through SFY 2016.
- This request is for \$67,000 general fund in SFY 2016.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	<b>\$67,000</b>	\$	\$	<b>\$67,000</b>
FY 2017	\$	\$	\$	\$
Biennium Total	<b>\$67,000</b>	\$	\$	<b>\$67,000</b>

**PL 33 33318 Private Lease Adjustment MCDC**

- This present law adjustment maintains existing services for the Montana Chemical Dependency Center, Butte, which relocated to a new facility in December of SFY 2014
- This request is for \$64,709 state special revenue fund in both SFY 2016 and SFY 2017.

<b>Fiscal Year</b>	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
FY 2016	\$	<b>\$ 64,709</b>	\$	<b>\$ 64,709</b>
FY 2017	\$	<b>\$ 64,709</b>	\$	<b>\$ 64,709</b>
Biennium Total	\$	<b>\$129,418</b>	\$	<b>\$129,418</b>